



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1430  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



CONFIRMATION NO. 8383

Bib Data Sheet

SERIAL NUMBER 10/799,806	FILING OR 371(c) DATE 03/13/2004 RULE	CLASS 601	GROUP ART UNIT 3771	ATTORNEY DOCKET NO.
-----------------------------	--	--------------	------------------------	------------------------

## APPLICANTS

Michael K. Julian, Pinellas Park, FL;

\*\* CONTINUING DATA \*\*\*\*\**KCM*  
 This appln claims benefit of 60/454,712 03/14/2003

\*\* FOREIGN APPLICATIONS \*\*\*\*\**KCM*  
 NONE

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
 \*\* 06/01/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after
Verified and Acknowledged	<i>KCM/Julia</i> <i>KCM</i> Examiner's Signature Initials
Allowance	
STATE OR COUNTRY	FL
SHEETS DRAWING	8
TOTAL CLAIMS	19
INDEPENDENT CLAIMS	2

## ADDRESS

40742

## TITLE

Multifunction massage system and method of use

FILING FEE RECEIVED 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
----------------------------	---	---